Maternal and Child Health, within the Bureau of Health Services in the Tennessee Department of Health, consists of two sections: Child and Adolescent Health and Children's Special Services and Women's Health/Genetics. Services in Child and Adolescent Health include Home Visiting programs, Adolescent Health, Abstinence Only Education, SIDS, Early Childhood Comprehensive Systems Planning, School Health, Child Fatality Review, Child Care Resource and Referral Centers, EPSDT, and Childhood Lead Poisoning Prevention. Services for CSHCN (called Children Special Services) include: medical and other health needs; care coordination/case management; and a Parent Support Network (PEP). The Women's Health/Genetics section includes comprehensive family planning services; prenatal care, adolescent pregnancy prevention, perinatal regionalization, women's health, newborn screening follow-up, newborn hearing screening follow-up, and the network of the genetics and sickle cell centers.

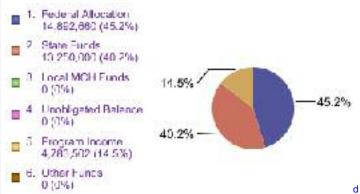
MATERNAL & CHILD HEALTH (MCH) MEASURES

MATERNAL & CHILD HEALTH (MCH) M	LASUKES	
Title V - MCH National Performance Measures	State 2004 Results	State 2009 Goal
The percent of newborns who are screened and confirmed with condition(s) mandated by their Statesponsored newborn screening programs (e.g. phenylketonuria and hemoglobinopathies) who receive appropriate follow up as defined by their State.	100.0%	100%
The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)	60.0%	75%
Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)	80.0%	90%
Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.	77.2%	95%
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.	26.3	23
The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.	4.2	3
Percentage of mothers who breastfeed their infants at hospital discharge.	62.0%	64%
Percentage of newborns who have been screened for hearing before hospital discharge.	97.0%	98%
The percent of very low birth weight infants among all live births.	1.4%	1.4%
Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.	80.4%	90%
Title V - MCH National Outcome Measures	State 2004 Results	State 2009 Goal
The infant mortality rate per 1,000 live births.	8.6	7.5
The ratio of the black infant mortality rate to the white infant mortality rate.	2.5	2.1
The neonatal mortality rate per 1,000 live births.	5.4	4.3
The postneonatal mortality rate per 1,000 live births.	3.2	2.6
The perinatal mortality rate per 1,000 live births plus fetal deaths.	9.1	8
The child death rate per 100,000 children aged 1 through 14.	22.3	15
Title V - Selected MCH State Performance Measures	State 2004 Results	State 2009 Goal
After implementation of folic acid education at the state, regional, and local levels, reduce the number of neural tube defects births.	*	22
Reduce the proportion of teens and young adults ages 15 to 24 with chlamydia trachomatis infections attending family planning clinics	6.6	5.2
Reduce to no more than 4% elevated blood lead levels in children 6-72 months of age who are screened.	0.5	1

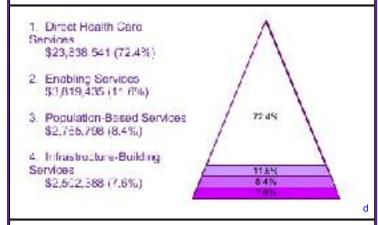
State Population: 5,845,208 Live Births: 78,901

TITLE V FEDERAL - STATE BLOCK GRANT EXPENDITURES

Populations Served	Number of Individuals Served	Expenditures FY 2004	
Pregnant Women	39,732	\$2,107,274	6.4%
Infants < 1 year old	88,595	\$4,675,515	14.2%
Children 1 to 22 years old	334,859	\$11,074,904	33.6%
Children with Special Healthcare Needs	6,125	\$5,771,395	17.5%
Others	154,189	\$8,132,762	24.7%
Administration		\$1,164,312	3.5%
Totals	623,500	\$32,926,162	100%
Totals	623,500 By Source of Fund	\$32,926,162	



By Category of Services



HOTLINE CALLS

FAMILY PARTICIPATION IN CSHCN PROGRAM

Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.

Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.

Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.

Family members are involved in service training of CSHCN staff and providers.

Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).

Family members of diverse cultures 3 are involved in all of the above activities.

FY 2004 Total: 18

Total Possible: 18

Scale: 0 = Not Met

1 = Partially Met 2 = Mostly Met

3 = Completely Met

MCH PARTNERSHIP FUNDS FY 2004

Title V Federal-State Block Grant:

32,926,162

Other MCHB Grant Programs:

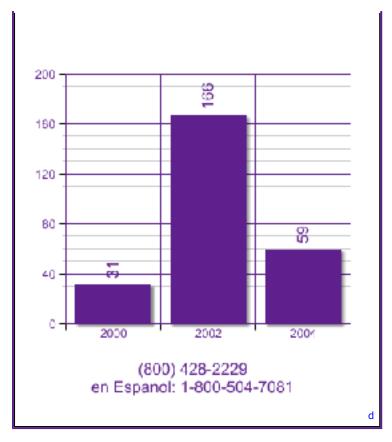
6,165,627

Bioterrorism Grant Program:

9,699,934

Total MCH Partnership Funds:

48,791,723



CONTACT INFORMATION

For More Information on Title V:

Title V Program, contact:

Dr. Theodora Pinnock Director of MCH 425 5th Avenue North, 5th Floor Nashville, TN 37347-4701 (615) 741-7353 (615) 741-1063 Theodora.Pinnock@state.tn.us

Title V Program's Services for Children with Special Health Care Needs, contact:

Greg Yopp
Director, Children's Special Services
425 5th Avenue North, 5th Floor
Nashville, TN 37247-4701
(615) 741-7353
(615) 741-1063
Gregory.Yopp@state.tn.us

* Data not available